

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

Form LM-30 (2003)

3. Name and address of person filing.

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· A MINOR.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

01 /01 /2005 Through: 12 / 31 / 2005

THE CALL CARE TO SELECT A CALL TO SECTION AND ADMINISTRATION OF THE CALL TH

4. Name, file number, and address of labor organization.

Name PERRY W. CHATTAIN	Name United Steelworkers Local 351r	
, ,	Labor Organization File Number 003-483	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 13821 Hwy. 216	Street 1923 Culver Road	
city CottoNDALE	City Tuscaloosa	
State ALv ZIP Code + 4 35453	State Alabama ZIP Code + 4 35401	
5. Position in labor organization.		
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any). Name 「んら CRED! ナ Uル (の) の「	7.a. Nature of Interest, Transaction, or Income. Suv Lond	
Trade Name, if any:	SIGNATURE (SPECIAL COAN) TRUCK LOAN TIRE LOAN SPOUSE SIG. SPEC, LOAN	
P.O. Box, Bldg., Room No., if any	5 pousé 5+6. 58EC. LOAN	
Street 1215 VETERANS MEMORIAN Street 1215 VETERANS MEMORIAN PARK WAY	3,784.27	
city JUSCA 100SA)	602.07	
State AlAb Am A ZIP Code + 4 35404	695.00	
Signature		

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report finduding the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a

substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if	f any). 9. Business deals with:
Name	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street	C. Employer
City	
State ZIP Code +	4
10. If 9.b. or 9.c. is checked give trust or employer's name	e. 11.a. Nature of such dealing.
Name	
Trade Name, if any:	
P.O. Box, Eldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code +	4
	12.b. Amount.
C. Received from any employer (other than an employer from any labor relations consultant to an employer ar	
13.a. Name and address of Employer or Labor Relations C (including trade name, if any).	Consultant 14.a. Nature of payment.
Name	
Trade Name, if any:	

Street City

State ZIP Code + 4

P.O. Box, Bldg., Room No., if any

13.b. Is the Business an Employer

14.b. Amount of payment.

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or Consultant 1